

DEPARTMENT OF MANAGEMENT AND BUDGET
NOTICE OF FAMILY AND MEDICAL LEAVE

(SEE REVERSE FOR GUIDANCE)

EMPLOYEE'S NAME (Print)	EMPLOYEE ID NUMBER	SOCIAL SECURITY NUMBER
FIRST DAY ABSENT		EXPECTED RETURN TO WORK DATE (If Known)


☐ Provisional FMLA Notice given. (See NOTIFICATION on reverse side)

A. Your leave has been designated as counting towards your Family Medical Leave Act 12-week leave entitlement:

- ☐ Medical Leave of Absence (MLOA) or sick leave (including pregnancy and work related injuries). ☐ If Intermittent.
☐ Family Care Leave due to the serious health condition of your ☐ spouse, ☐ child, or ☐ parent. ☐ If Intermittent.
☐ Parental Leave to care for a newborn child or newly placed adopted or foster child. ☐ If Intermittent.

B. FMLA entitles an eligible employee up to 12 weeks of leave in a 12-month period for the reasons listed above.

1. **All of your absences with or without the use of leave credits and/or lost or unpaid time for the reasons prompting this notice will count against your 12-week leave entitlement.** (You are not required to use your annual or personal leave.)
2. You are required to exhaust all of your sick leave credits before a Medical Leave of Absence is approved in accordance with Civil Service Rules or union contractual provisions.
3. You are required to exhaust your sick leave credits (NERE/MSEA to balance of 80 hours), if this is a **Family Care Leave**.
4. During Parental Leave, annual leave, personal leave, or unpaid leave may be used; use of sick leave is not permitted.
5. You are required to furnish medical certification for MLOA or sick leave. It is your responsibility, not that of your health care provider, to give all certifications to the Department on a timely basis. **You are also required to tell your supervisor of your expected return to work date and of any changes or requested extensions to your leave.**
6. You may be required to report periodically on the progress of your leave. This may involve submission of a new certification by a health care provider. Such reports will not be required more frequently than every 30 days.
7. For Medical Leave of Absence or sick leave, prior to returning to work you are required to present a fitness-for-duty certification. If such certification is not received, your return to work may be delayed until such certification is provided.
8. The Department is required to pay its share of your health insurance premium; you are responsible for your share at the time you go off payroll.
 - A Request for Continuation of Insurance (DMB-1499-OSE) form will be mailed to you by Human Resources. **You must complete and return the form within 60 days as instructed on the form to maintain health coverage, even if you have LTD. Otherwise, your insurances will end on the date noted on the DMB-1499-OSE.**
 - If the leave is for your illness, and you have purchased LTD, you will not receive a bill for the Health Insurance Premium. Your share of the health insurance premium is paid during your absence up to a maximum of six months.
 - If you have not purchased LTD, you will receive a billing statement. If the payment is not made, your health coverage will end and may not be reinstated until you return to work.
 - If the leave is for Family Care or Parental Leave, you are required to pay your share of the health insurance premiums directly to Human Resources at the time you go off the payroll. LTD does not pay the premium for these leaves.
 - You may be required to repay the State's share of the health premiums if you do not return to work at the expiration of the leave for reasons other than a serious health condition or circumstances beyond your control.

9. At the end of your leave, you are entitled to be returned to your same position or another equivalent position.

SUPERVISOR'S SIGNATURE (Legible)	SUPERVISOR'S PHONE NUMBER	DATE FORM GIVEN/SENT TO EMPLOYEE
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DISTRIBUTION: WHITE Human Resources (517) 373-1000
 CANARY Employee
 PINK Supervisor

Family and Medical Leave Act (FMLA) Guidance

(Letters and numbers are referenced to the reverse)

◆ NOTIFICATION:

- The supervisor is required to complete and sign this **NOTICE OF FAMILY AND MEDICAL LEAVE** (DMB-96) and must either give or send this form to the employee. Send the white copy to Human Resources.
- When the employee tells the supervisor or the supervisor learns of the employee's need to be absent, the supervisor should quickly review in his or her mind the information given in this guidance.
- This Notice should be given at the beginning of the absence or when the reason for the absence becomes clear to the supervisor (typically when the certification is received) that the employee is eligible under Section B and is absent for the reasons described in Section A. This FMLA notice can be backdated to the beginning of the leave or for more than 2 working days only under certain conditions.
- Provisional FMLA Notice: If the certification is not in hand and/or the supervisor is unsure of the reason for the absence, the supervisor should tell the employee that provisional FMLA notice is given until the certification is reviewed. This verbal provisional notice gives you time to receive and review the certification and permits backdating of the effective date of the FMLA leave.
- If the employee does not have the certification in hand or does not know when the certification will be provided, the employee should call the supervisor daily or on an agreed upon time until the certification has been received and reviewed by the supervisor and/or the department. Avoid "As soon as possible" responses, set a time and date.

A. Reasons for the absence: (From Reverse)

- Serious medical conditions requiring a MLOA (lost/unpaid time), Family Care or sick leave:
 - Rule of thumb: Absences for 3 or more days of lost time or 5 or more days with the use of leave credits.
 - All absences that involve; inpatient hospitalization; illnesses under the direction of a health care provider that, require two or more medical treatments, a continuing treatment regime, are for a chronic condition, or are for a condition that does not require active treatment because there is no cure.
 - All absences due to pregnancy or pre-natal care.
- Family Care leaves for spouses, parents, children under 18, or adult children who are incapable of self-care.
- Parental leaves for newborns, adoptions, or foster care placements. (Formally known as maternity/paternity)

B. Eligibility: (From Reverse)

- Must have worked for the State of Michigan for more than a total of 12 months. The total time does not have to be continuous. There may be breaks in service. Time worked includes work for other state departments, time in limited term appointments, or working for the State through a temporary employment agency.
- AND must have worked 1,250 hours in the last 12 months, including overtime hours. Time worked does not include the use of leave credits. In essence, have they worked over 7 months in the last 12 months?
- AND must not have exhausted his or her 12-week FMLA annual entitlement.
- Initial probationary employees and students are not eligible, unless they meet the above time worked requirements.

1. FMLA leave or absences are not in addition to Civil Service or Union contractual leaves, including sick leave.

- FMLA leave or absences run concurrent with the use of sick; annual, in lieu of sick; Medical; Parental or Family Care Leaves or while on workers' compensation leave.

4. Sick leave may only be used when the spouse or new child is ill. Sick leave usage for the purpose of bonding with the child, assisting the spouse or Parental Leave is not permitted.

5. Employees are required for MLOA, sick and Family Care Leave reasons to provide medical certification that includes the medical reasons for their absence, and an expected return to work date. An unknown or indefinite leave will not be approved. The Medical Certification of Health Care Provider (DMB-94) or a similar medical certification providing the required information may be used. **Employees are also expected to talk with and tell their supervisor of their need to be absent, when they are expected to return to work, and if there is a need for an extension or change to their absence.** Failure to follow these requirements and expectations may result in being absent without approved leave and/or corrective action.

8. During an FMLA covered absence, the State is required to continue employees' health insurance premium, **only if employees pay their share**. FMLA does not require other insurances be continued. The use of leave credits will continue their insurances. If employees go off the payroll, they must complete and send the Continuation of Insurance form (DMB-1499-OSE) to the Employee Benefits Division **if they want to continue their insurances, including health, even if they have the LTD health insurance rider coverage.**

◆ TIMEKEEPING: If leave credits are used, report the hours in their respective columns and the FMLA column on the timesheet. In DCDS FMLA designated hours or leave credits are reported by using FMSL for (sick leave), FMAL (annual), FMCM (comp), FMDF (deferred) or FMLA (lost time). **Employees must tell their supervisor if they want to use annual leave. Otherwise their annual leave will be frozen.**